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| Institution/Division Name  Lamaica Plain Drug Lab  Employee Name and Address  Employee Reimburse   |  |  |   | rsement                 | Form   |                              | Page                                    |  | _ of   |   |  |
|--|--|--|---|-------------------------|--|------------------------------|---|--|--|---|--|
| Employee IU # Employee or Contractor Little  |  | Bargaining Unit  |   | Appropriation           |  |                              | Unit                                    |  | Object   |   |  |
| <u> </u>   | 296644 Chemist II  |  |   |                         |  |                              |   |  |  |   |  |
| Documen  | nt Total:\$  | Reconciliation Date:   |   | Schedule F              | Pav Date:  |                              |   | Budg   | get FY   | F                                       | Y  |
|  |  | Note: The state of | Tot                                     | tal Private A           | Auto Mileage   | 3                            |   | мания политический | ASSESSMENT AND ASSESSMENT ASSESSMENT AND ASSESSMENT ASSESS |   | -  |
| Date   | Description  | ion  | Odometer F                              | Readings                | Total Miles  |                              | Meals                                   | Fares  | Hotel  | Other                                   | Total  |
|  |  |  | Beginning                               | Ending                  | TOtal whice,   |                              | IVICAIS                                 | Faics  | Hotel  | Expenses                                |  |
|  | Trave I for Court Summons  |  |   |                         | 114  | 6.30                         |   |  |  |   | 630  |
| 10114  | Travel for Court Summons   | 5-Novfolk ypenor   | *************************************** |                         | 114  | 630                          | <b></b>                                 |  | <u> </u>   | 5.00                                    | 11.30  |
| -  |  | Ü  |   |                         | <u> </u>   |                              | *************************************** |  | -  |   |  |
|  |  |  |   | <b></b>                 | ļ  |                              | ł                                       |  |  | -                                       | MARIE TYPE STREET  |
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| ***************************************  |  |  |   |                         |  |                              |   |  |  |   |  |
|  |  | · .  |   |                         |  | <b>†</b>                     |   |  |  |   |  |
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|  |  |  |   |                         |  |                              |   |  | · · · · · · · · · · · · · · · · · · ·  |   | s 17 60  |
| Employee<br>of the C   | ee's Certification: I herby certify unde<br>Commonwealth and conform fully with rule | er the penalty of perjury that the es and regulations pertaining to  | amounts itemize employee reimb          | ed above are tursement. | Employee'  | , were incurre<br>s Signatur | d by me dun<br>e:                       | ing the perform  | nance of my  | official duties                         | The necessary statement and the statement and th |
| Supervis   | isor's Approval:   | Jalomi   |   | Title: 4                | LAborAT  | Tory Sy                      | pervison                                | e II   | Date:  | 7/26/                                   | /2_  |
| Fiscal Ver   | rification:  |  |   | Title:                  | **************************************   |                              |   |  | _ Date:  |   |  |
| Fiscal App   | proval:  |  |   | Title:                  | MANAGEMENT AND ADDRESS OF THE PARTY OF THE P |                              | TO THE OWNER OF THE OWNER.              | DECEMBER OF THE PROPERTY OF TH | _ Date:  | WY9999999000000000000000000000000000000 | B0000000000000000000000000000000000000   |
| Entered Into HR/CMS By:  |  |  |   | Title:                  |  |                              |   |  | Date:  |   |  |

County of Norfolk

## Parking Receipt

THE COUNTY OF NORFOLK IS NOT RESPONSIBLE FOR LOST OR STOLEN ITEMS OR DAMAGE TO VEHICLE.

\$5.00

Nº. 58736

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| The Com   | ımonw                                       | /eal                   | th of I  | Mas                                   | sac                      | husetts  |
|---|---|------------------------|--|---------------------------------------|--------------------------|--|
| Norfolk, ss.  |   | AMILIA                 | ***************************************  |                                       | SUPERIO                  | R COURT  |
|   | 0.000                                       | SU                     | MMONS  |                                       |                          |  |
| 77  | 36 1 6                                      |                        |  | · · · · · · · · · · · · · · · · · · · |                          | The state of the s |
|   | Kate Corbett,                               |                        |  |                                       | -                        |  |
|   | Department of                               |                        | Health   |                                       |                          | ***************************************  |
| i de la companya de     | 305 South Str                               |                        | 400  |                                       |                          | V0700000000000000000000000000000000000   |
|   | Jamaica Plain                               |                        |  |                                       |                          | 1 0 1  |
| You are hereby commanded a Court for the County of Norfathereafter, until the action her relating to the case of: | olk, 650 High S<br>reinafter named          | street, De<br>is heard | dham, <u>JULY 1</u><br>by said Court,  | 10, 2012 at<br>to give ev             | t 9:00 A.N<br>vidence of | A. and from day to day   |
| Con   | nmonwealth (                                | of Mass                | achusetts v  | s Gerard                              | Hadley                   |  |
| you are further commanded to printed documents and record pertaining to:  Certificates of Anal                    | ls in your posse                            | u all bookssion, cu    | ks, papers, con<br>stody or contro   | responden<br>ol, relating             | ce and all               | other written or<br>g or in any way  |
| Cei tilicates of Aliai  | ysis 140s.                                  |                        |  |                                       |                          |  |
| Witness,  | BARBARA J. ]                                | ROUSE,                 | ESQUIRE at 1   | Dedham,                               | June 29, 20              | 012  |
|   |   |                        | istant District  |                                       | Thomas L.                | Finigan  |
| Place: Superior Court, 650 High St., Dedham Date: JULY 107, 2012  |   |                        |  |                                       |                          | Y 107, 2012  |
| Telephone:  | 00 x245 Time: 9                             |                        |  | 00 AM                                 |                          |  |
| Any correspondence should be sent to: Thon  | nas L. Finigan,                             | ADA, D                 | A's Office, 45   | Shawmut                               |                          | anton, MA 02021  |
|   |   |                        | Michael W. Morris  |                                       | -                        |  |
|   |   | Michael                | chael W. Morrissey, District Attorney  |                                       |                          | <b>30</b>  |
|   | P   | FTIIRN                 | OF SERVICE   | E-4100-040-0-1                        |                          | 7,000  |
|   |   | LIOMY                  | OF BERVICE   |                                       |                          | 2012   |
|   |   |                        |  | (month)                               | /dat                     | ······································   |
| Norfolk, ss. By virtue of this writ, I hav (complete one of the following)  |   | ne within              | named witnes   |                                       | (dat<br>ir appeara       | ***************************************  |
| By delivering a copy of this w  | rit in hand to                              |                        | MY TO THE STATE OF |                                       |                          |  |
| By leaving a copy of this writ  | at the last and                             | vouel pla              | a of shode to  | 22266                                 |                          |  |
| No.   | at the last allel t                         | usuai piä              | Street   | wit.                                  |                          | C't. a. T.   |
| 140.  |   |                        | 201661   |                                       |                          | City or Town   |
| *   | * Police Officer, Constable, Deputy Sheriff |                        |  |                                       |                          |  |

Trip to:

650 High St
Dedham, MA 02026-1855

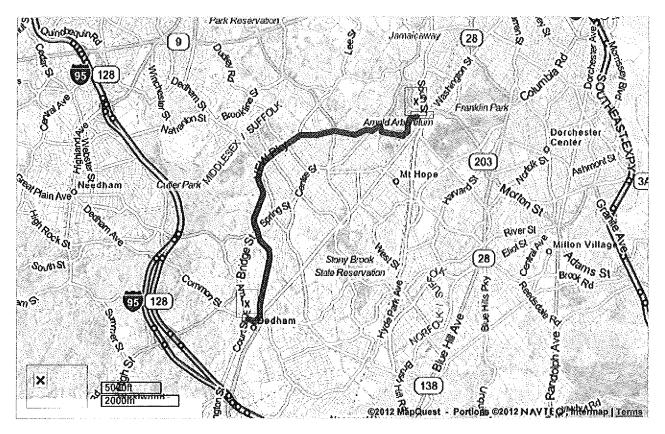
6.49 miles / 14 minutes

Notes

## **305 South St**, Jamaica Plain, MA 02130-3515

| X             | Start out going west on South St toward Chocorua St. <u>Map</u>    | 0.5 Mi |
|---------------|--|--------|
| [ <b>x</b> ]  | 2. Turn slight right onto Bussey St. <u>Map</u>                    | 0.4 Mi |
| <b>x</b>      | 3. Turn <b>right</b> onto <b>Walter St</b> . <u>Map</u>            | 0.1 Mi |
| x             | 4. Turn left onto Centre St. <u>Map</u>                            | 0.2 Mi |
| ×             | 5. Take the 1st right onto VFW Pky. Pass through 1 roundabout. Map | 4.0 Mi |
| ×             | 6. Stay straight to go onto Boston Providence Hwy / VFW Pky. Map   | 1.0 Mi |
| [ <b>x</b> ]  | 7. Turn slight right onto Washington St. <u>Map</u>                | 0.2 Mi |
| [X]           | 8. Turn right onto High St. <u>Map</u>                             | 0.1 Mi |
| [X]           | 9. 650 HIGH ST is on the left. Map                                 |        |
| kannanna mara | 650 High St, Dedham, MA 02026-1855                                 |        |

## Total Travel Estimate: 6.49 miles - about 14 minutes



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